The Florida Senate **COMMITTEE MEETING EXPANDED AGENDA**

HEALTH POLICY Senator Burton, Chair Senator Brodeur, Vice Chair

MEETING DATE: Tuesday, November 14, 2023

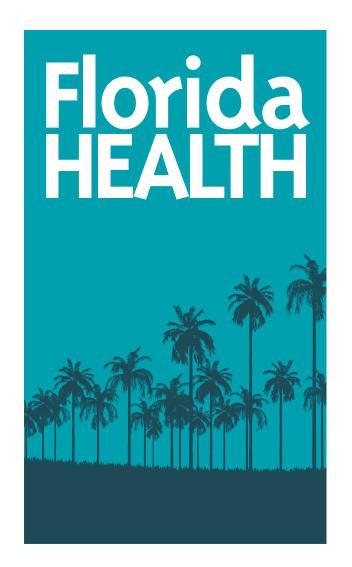
TIME:

4:00—6:00 p.m. Pat Thomas Committee Room, 412 Knott Building PLACE:

MEMBERS: Senator Burton, Chair; Senator Brodeur, Vice Chair; Senators Albritton, Avila, Book, Calatayud,

Davis, Garcia, Harrell, and Osgood

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	Presentations on Issues Relating to Shortages of Health Care Professionals – Department of Health and Agency for Health Care Administration		Presented
2	Panel Discussion on Innovative Approa	ches to Health Care Workforce Challenges	Discussed
	Other Related Meeting Documents		



Florida's Physician and Nursing Workforce

Emma Spencer, PhD, MPH

Division Director

Division of Public Health Statistics and Performance Management Florida Department of Health

Health Care Workforce in Florida

The term "health care workforce" means a health care professional working in health service settings.

Physicians and nurses make up the largest segments of the health care workforce.

- Health Care and Social Assistance is the 3rd fastest growing industry in Florida.
- Nursing and Residential Care Facilities comprise the largest subsector of that industry.
- Nurse Practitioners are the fastestgrowing occupation in Florida (projected growth of over 7,000, or 49.9% between 2020 and 2030).
- Eight of the Top 10 fastest-growing occupations in Florida are in health care.

Source: 2023 FloridaCommerce, Bureau of Workforce Statistics and Economic Research



3

Growing Demand for Staff

- Demand for physicians in the United States (U.S.) is projected to grow faster than supply, leading to a potential nationwide shortfall of as many as 124,000 full time equivalent physicians in 2034.
- In 2035, 17,924 physicians, including 5,974 primary care specialists, will be required to meet the demand in Florida.
- Demand for Registered Nurses in the U.S. is projected to grow by 203,200 in 2031.
- In 2035, 50,700 Registered Nurses and 4,000 Licensed Practical Nurses will be required to meet the demand in Florida.

Source: ¹Association of American Medical Colleges

³ IHS Markit 2021, Florida Statewide and Regional Physician Workforce Analysis 2019–2035

² U.S. Bureau of Labor Statistics

⁴ IHS Markit 2021, Florida Nurse Workforce Projections 2019–2035



U.S. Physician Workforce

Florida ranks 25th among the 50 states in active physicians per 100,000 population.

Florida: 273.9 physicians per 100,000 Nationally: 286.5 physicians per 100,000

Massachusetts: 466.0 (1st)

Maryland: 331.7 (2nd)

New York 389.4 (3rd)

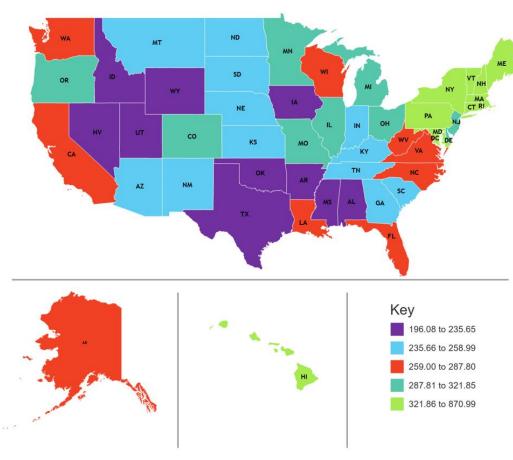
Vermont: 386.2 (4th)

Rhode Island: 383.5 (5th)

Source: 2021 Association of American Medical Colleges State Physician Workforce Data Book

Definition: Active physicians includes those licensed by a state working more than 20 hours a week. Active physicians include those working in direct patient care, administration, medical teaching, research, or other nonpatient care activities. Active physicians include those with a doctor of medicine (MD) or a doctor of osteopathic medicine (DO) degree.

U.S. Physicians, Rate per 100,000 Population, 2020





Florida – Physician Workforce by County

Physicians are generally concentrated in urban and higher populated counties.

The counties with the highest per capita of physicians are the most populated counties.

Five Counties with Most Physicians (Total/Per 100k)

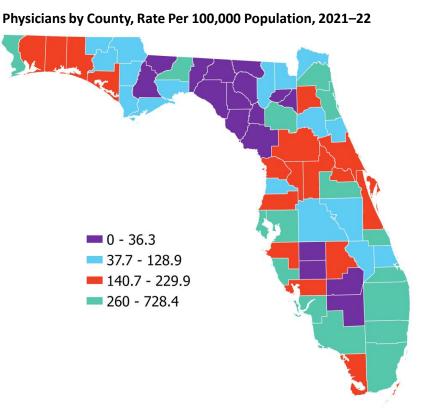
Miami-Dade: 8,486 (296.6)

Broward: 5,275 (270.9)

Hillsborough: 4,973 (323.2)

Palm Beach: 4,870 (327.4)

Orange: 4,757 (319.8)

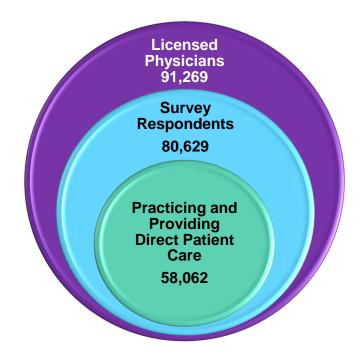


Source: Florida Department of Health, Division of Medical Quality Assurance, 2021–22



Physicians Survey

- Sections 458.3191 and 459.0081, Florida Statutes, establishes the Physicians Survey which is administered to physicians every two years upon license renewal.
- Survey results are analyzed and compiled by the Florida Department of Health Primary Care Office, and the results are published in an annual report.
- Out of 91,269 licensed physicians in 2022, 80,629 (88%) renewed their medical license during the 2021 and 2022 renewal cycle and responded to the survey.



Source: 2022 Physician Workforce Annual Report



Florida – Growth in Licensed Physicians

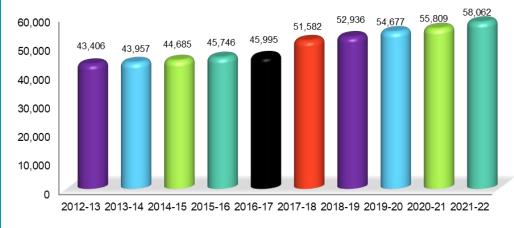
Physicians Survey Respondents:

- Between 2012–13 and 2021–22, the number of physicians providing direct patient care increased from 43,406 to 58,062.
- During this same time, the population of Florida increased from 19,118,938 (2012) to 22,005,587 (2021).¹

Source: 2022 Physicians Workforce Annual Report

¹FLHealth CHARTS, Population Dashboard

Physicians providing direct patient care in Florida, 2012–2013 through 2021–2022



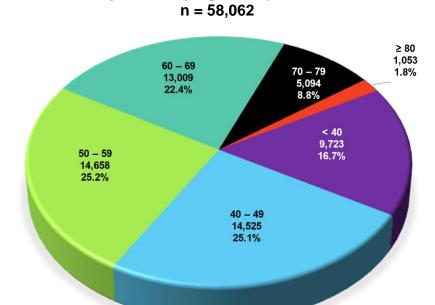


Florida – All Physicians by Age Group

- According to the Physicians Survey, physicians aged 50–59 comprise the largest group of Florida physicians.
- The average age of practicing physicians is 53 years old.
- The percentage of physicians working past typical retirement age (65 or older) is 20.6%.
- Florida ranks sixth among all states in terms of the highest percentage of physicians over 60 years old.¹

Source: 2022 Physician Workforce Annual Report

12021 Association of American Medical Colleges State Physician
Workforce Data Book



Physicians by Age Group, 2020-22

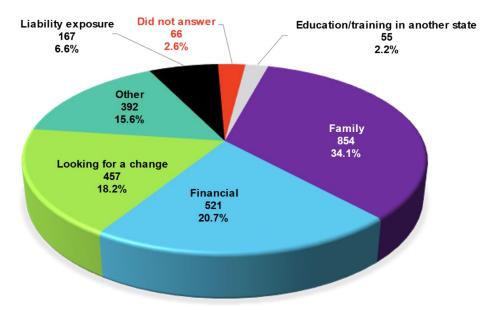


Florida - Physicians Planning to Relocate

- Approximately 4.7% (2,512) of physicians responded that they plan to relocate from Florida in the next five years.
- The primary reasons cited by these physicians for their planned relocation are:
 - Family (34.1%)
 - Financial (20.7%)
 - Looking for a change (18.2%)

Source: 2022 Physician Workforce Annual Report

Physician Relocation Reasons, Florida, 2020–22

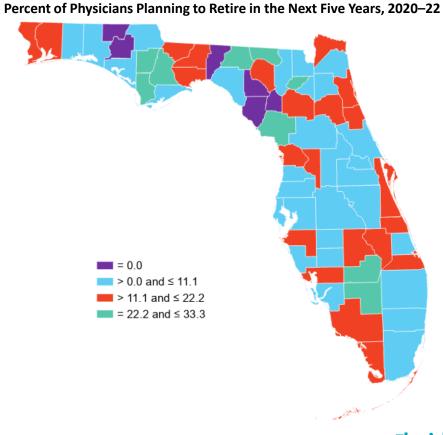




Florida - Physicians Planning to Retire

- 9.7% of practicing physicians, equivalent to 5,633 individuals, are planning to retire within the next five years.
- There are nine counties with at least 25% of physicians reporting that they are planning to retire in the next five years.
- Number of Retiring Physicians
 - Glades (2 out of 6)
 - Gulf (6 out of 18)
 - Hamilton (1 out of 3)
 - Madison (2 out of 7)
 - Union (5 out of 18)
 - Calhoun (3 out of 11)
 - Hendry (7 out of 27)
 - Levy (3 out of 12)
 - Liberty (1 out of 4)

Source: 2022 Physician Workforce Annual Report



U.S. Primary Care Physician Workforce

Primary care physicians practice in general internal medicine, family medicine and general pediatrics.

Florida ranks 31st among the 50 states in active primary care physicians per 100,000 population.

Florida: **88.5 physicians per 100,000** 94.4 physicians per 100,000 **Nationally:**

140.1 (1st) **Vermont:** Massachusetts: 136.4 (2nd) Maine: 128.9 (3rd) Hawaii: 123.8 (4th) **Rhode Island:** 122.0 (5th)

Source: 2021 Association of American Medical Colleges State Physician Workforce Data **Book**

U.S. Primary Care Physicians, Rate per 100,000 Population, 2020





Florida – Primary Care Physicians by County

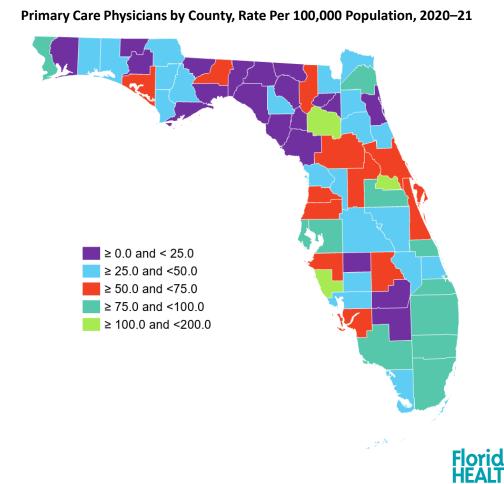
Three counties have more than 100 physicians for every 100,000 residents.

- Alachua (163.4) = 465
- Seminole (138.1) = 265
- Sarasota (113.5) = 386

Three largest counties:

- Miami-Dade (86.7) = 2,368
- Broward (83.3) = 1,628
- Palm Beach (85.1) = 1,278

Source: 2022 Physician Workforce Annual Report

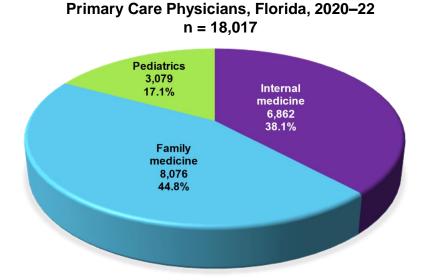


Primary Care Physicians in Florida

Primary care physicians make up less than one-third of the physicians providing direct patient care (31.5% or 18,017).

Of primary care physicians,

- 44.8% specialize in family medicine.
- 38.1% specialize in internal medicine.
- 17.1% specialize in pediatrics.



Source: 2022 Physician Workforce Annual Report



U.S. Nursing Workforce

Florida ranks fourth among the 50 states in active Registered Nurses (RNs).

Florida: 368,421 active RNs

Nationally: 5,647,563 active RNs

California:518,696 (1st)New York:424,452 (2nd)Texas:398,142 (3rd)Florida:368,421 (4th)Pennsylvania:247,573 (5th)

Source: 2023 National Council of State Boards of Nursing, A Profile of Nursing Licensure in the U.S.

Total Number U.S. Active RN Licenses by State (data as of September 15, 2023)



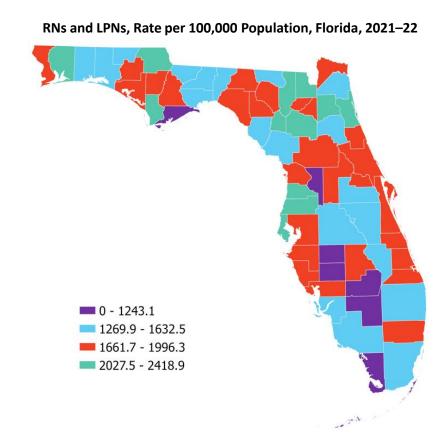




Florida - Nursing Workforce by County

10 Counties with Highest Per Capita of Nurses, Total (per 100k)

Baker: 706 (2,418.9) 1,136 (2,400.6) Jackson: Gilchrist: 436 (2,365.5) Alachua: 6,701 (2,305.7) Columbia: 1,611 (2,286.9) Santa Rosa: 4,390 (2,230.5) 12,483 (2,108.5) Pasco: Hernando: 4,187 (2,099.5) 20,240 (2,085.5) Pinellas: 4,691 (2,080.0) Clay: Gulf: 309 (2,056.6) St. Johns: 6,079 (2,027.5)



Source: Florida Department of Health, Division of Medical Quality Assurance, 2021-22

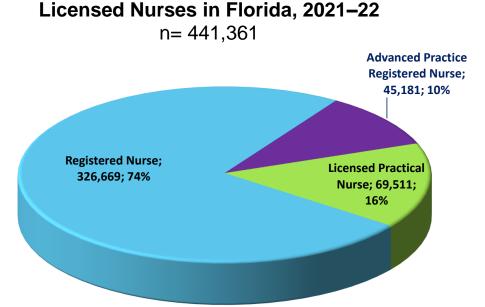


Nursing Workforce in Florida

Nurses make up the largest segment of the health care workforce in Florida.

- RNs account for 74% of all nurses.
- 16% are licensed practical nurses (LPNs).
- 10% are advanced practice registered nurses (APRNs).

Source: 2022 Department of Health, Division of Medical Quality Assurance





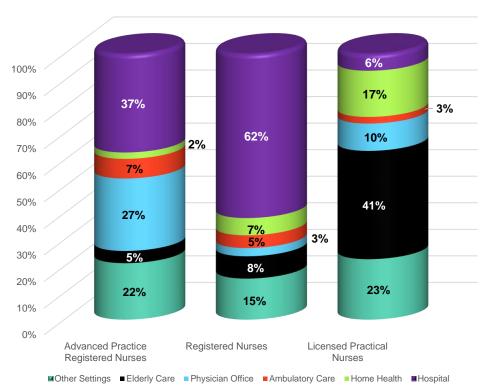
Nursing Workforce in Florida

The majority of nurses work in hospitals (inpatient settings).

- 62% of RNs and 37% of APRNs work in hospitals (inpatient settings).
- 41% of LPNs work in elder care.
- 27% of APRNs work in physician offices.

Source: 2023 Florida Center for Nursing, State of the Nursing Workforce

Nursing Work Settings, Florida, 2021-22

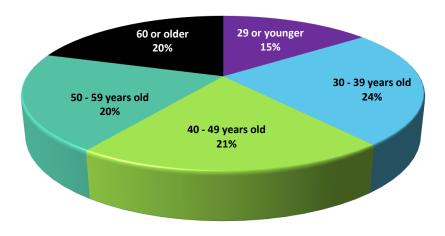




Florida - Nurses by Age Group

- The average age of Florida nurses (RNs and APRNs) is 46 years old.
- 20% of the nursing workforce is over the age of 60.
- Almost 65,000 RNs are over the age of 60 and may leave the workforce in the next five to ten years.

Working Age of Florida RNs, Florida, 2021–22



Source: 2023 Florida Center for Nursing, State of the Nursing Workforce



Contact Information

Emma Spencer, PhD, MPH

Division Director

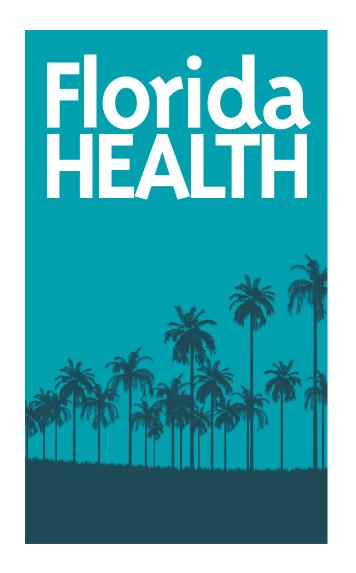
Division of Public Health Statistics and Performance

Management

Florida Department of Health

Emma.Spencer@flhealth.gov





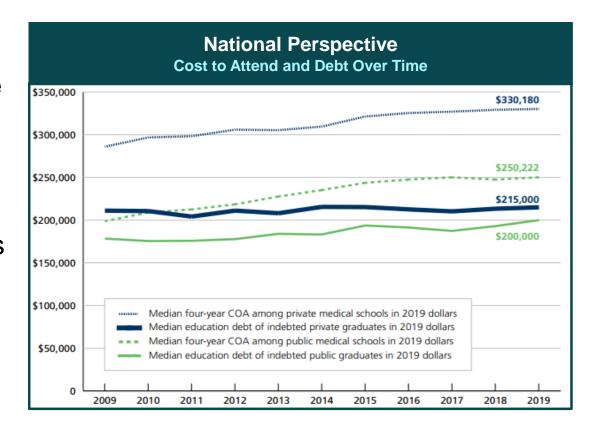
FLORIDA REIMBURSEMENT ASSISTANCE FOR MEDICAL EDUCATION

Emma Spencer, PhD, MPH

Director, Division of Public Health Statistics and Performance Management Florida Department of Health

Medical School Expense and Loan Debt

- Each year, roughly three of every four medical students use federal loans to finance their education, costing \$3 billion annually.
- Median education debt for public medical school graduates in 2019 was \$200,000.
- More than 72% of medical school graduates have educational debt.





Program Purpose

Florida Reimbursement Assistance for Medical Education (FRAME)

- Encourages qualified health care professionals to practice in underserved locations across Florida.
- Provides one-time payment to the applicant's lending institution to offset loans and educational expenses.
- \$16 million in dedicated recurring funding from General Revenue.



Reported Debt by FRAME Applicants



\$59,627
Average Loan Debt
Reported by FRAME
Applicants

Total and Average Loan Balances Reported by License Type by FRAME Applicants, FY 2022-2023

Applicant Type	Number of Applicants	Total Debt	Average Debt
Physicians (MD, DO)	1,095	255,000,000	86,171
Advanced Practice			
Registered Nurses	537	33,000,000	32,718
Physician Assistants	168	16,000,000	31,566
Registered Nurses	574	11,000,000	15,072
Autonomous Practice			
APRN	172	3,000,000	45,150
Licensed Practical Nurses	61	655,000	11,498



Award Limits by Provider Type

Medical Doctors and Doctors of Osteopathic Medicine

Up to **\$20,000**

Autonomous Practice APRN

Up to **\$15,000**

Advanced Practice Registered Nurses and Physician Assistants

Up to **\$10,000**

Licensed Practical Nurses and Registered Nurses

Up to **\$4,000**



Award Prioritization

All accepted applications are assigned a weighted prioritization score derived from the following three factors:





Award Summary, FY 2022-2023

Submitted Applications

- 3,702 applications were submitted to the FRAMEworks Portal.
- 38% of the applications met the program requirements, representing \$40.8 million requested for loan forgiveness.
- 39% of applications meeting program requirements (1,097) were provided awards, within the available \$16 million appropriation.

Award Distribution by Provider Type

191 120 688 Physicians **Advanced Practice** Registered Nurses Registered Nurses **Florida** provided 1,097 awards in FY **56** 22 20 2022-2023. Physician **Licensed Practical** Autonomous **Assistants Practice APRN** Nurses



Total Award Distribution by Provider Type

Physicians received 81% of the available funding.

\$12,897,865Physicians

\$1,763,773 Advanced Practice Registered Nurses

\$449,971Registered Nurses

\$512,249Physician
Assistants

\$302,079Autonomous
Practice APRN

\$73,950
Licensed Practical
Nurses



Application Submissions

We anticipate the application window to be open from February 1 through March 31, each year, at FDOHframe.com.





Additional Incentive Program

FRAMEdental

- The FRAME^{dental} program will promote access to dental care by supporting qualified dentists who treat medically underserved populations in Dental HPSAs.
- Annual payments up to \$50,000 per dentist to offset student loans and educational expenses.
- Program launch anticipated in February 2024.
- \$1.8 million is available from appropriations for the program.



Contact Information

FRAME Program

Emma Spencer, PhD, MPH

Division Director Division of Public Health Statistics and Performance Management 850-245-4009

Emma.Spencer@flhealth.gov

FRAME Program Support

850-841-8540

FRAMESupport@flhealth.gov



The Florida Senate

APPEARANCE RECORD

Bill Number or Topic	
mendment Barcode (if applicable)	

	Meeting Date	Deliver both copies of this form to	Bill Number or Topic			
HEA	LTH foucy	Senate professional staff conducting the meeting				
	Committee `		Amendment Barcode (if applicable)			
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	m appearing without mpensation or sponsorship.	I am a registered lobbyist, representing:	I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:			

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022 Joint Rules.pdf (flsenate.gov)

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11/14/23

S-001 (08/10/2021)

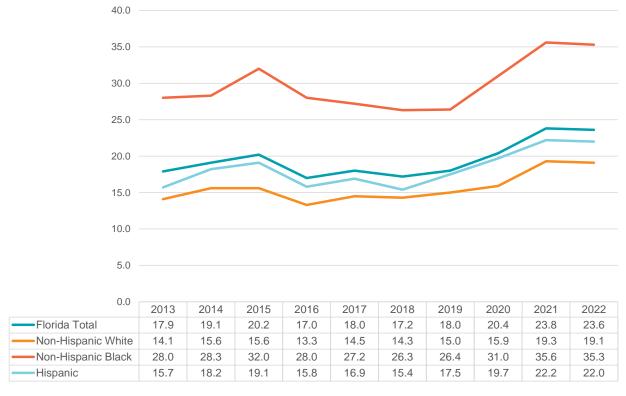
TELEHEALTH MINORITY CARE PILOT PROGRAM



Kenneth A. Scheppke, M.D., F.A.E.M.S

Deputy Secretary for Health Florida Department of Health

Data



Severe Maternal Morbidity

The presence of a complication during a delivery hospitalization that results in short- or long-term affects to a woman's health.

The Severe Maternal Morbidity (SMM) rate is the number of delivery hospitalizations with at least one of the 21 defined SMM indicators per 1,000 delivery hospitalizations.

Source: FLHealthCHARTS, Florida Department of Health; 2022 Hospital Discharge Data, Florida Agency for Health Care Administration



Data

Leading Indicators of SMM, 2013-2022

From 2013 to 2022, there were 51,454 cases of SMM among delivery hospitalizations in Florida.

Rank	Indicator	Number of Cases
1	Blood products transfusion	27,403
2	Disseminated intravascular coagulation	4,317
3	Adult respiratory distress syndrome	2,824
4	Other	16,910

Source: Hospital Discharge Data, Florida Agency for Health Care Administration



Data



Pregnancy-related death, is the death of a woman during pregnancy, or within one year of the end of pregnancy, from a pregnancy complication, a chain of events initiated by pregnancy, or the aggravation of an unrelated condition by the effects of pregnancy.¹

The Pregnancy-Related Mortality Ratio is the number of pregnancy-related deaths per 100,000 live births.

Source: Florida Maternal Mortality Committee Data

1. Centers for Disease Control and Prevention



Data

Between 2012-2021, there were 416 pregnancy-related deaths in Florida.

Note: The Florida Maternal Mortality Review Committee is a one-year retrospective review of confidential, de-identified cases of maternal deaths. Therefore, 2022 data are not yet available.

Rank	Underlying Cause of Death	Number of Deaths
1	Hemorrhage	72
2	Infection	78
3	Hypertensive Disorder	51
4	Other	215

Source: Florida Maternal Mortality Committee Data



Program Overview

- Established pilot programs (Fiscal Year 2022-2023) in Duval and Orange counties to improve maternal health outcomes in priority populations.
- Provides services to pregnant and postpartum women using telehealth.
- Requires the Florida Department of Health's Division of Community Health Promotion and Office of Minority Health to work in partnership.

Services include:

- Screening and treatment
- Referrals to meet individualized needs
- Education on pregnancy, childbirth, and parenting
- Connection to perinatal health workers
- Devices to conduct wellness checks (i.e., scales, blood pressure cuffs, glucose monitors)
- Training to participating health care practitioners

Florida HFAITH

Pilot Year Activities Fiscal Year 2022-2023

- Provided 2,533 patients access to maternal health care who might not have access to it otherwise.
- Connected patients with social service organizations to address additional needs.
- Identified patients with chronic health conditions and enrolled them in health management programs.
- Provided blood pressure cuffs, scales, and glucose monitors to patients as needed for remote monitoring and management of health conditions.
- Provided timely health care interventions to reduce instances of emergency room visits.

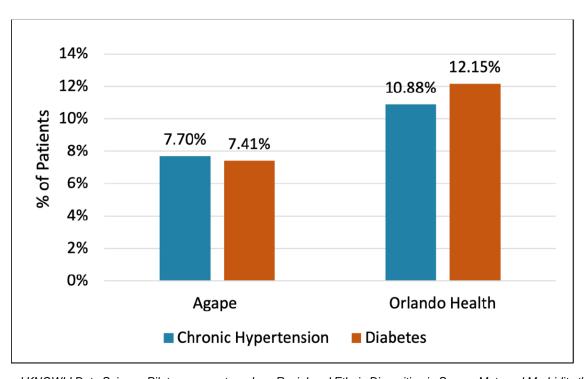


Pilot Year Measures

Measure	Orlando Health	Agape
Enrollment	1,327	1,206
Average Number of Consultations Per Patient	3.00	4.07
Percent of Patients Enrolled in Hypertension Management Plan	100%	79%
Percent of Patients Enrolled in Diabetes Management Plan	100%	66%
Total Number of Community Partners	9	8
Percent of Patients with at least One Referral	80%	59%
Percent of Referrals Made from Identified Social Needs	100%	90%
Percent of High Satisfaction with the Program	87%	70%

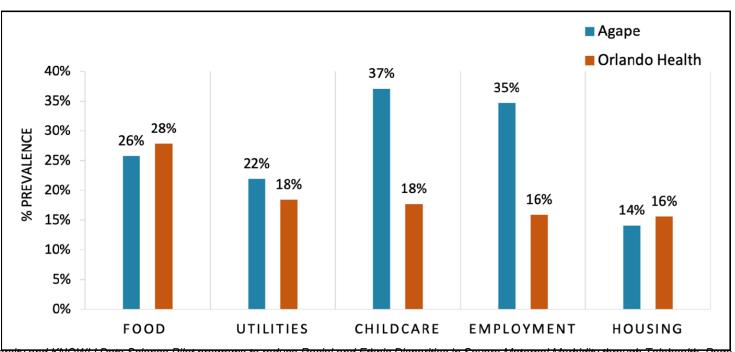


Patients with Chronic Health Conditions





Resources Provided by Community Partners





Evaluation

Maternal health outcomes:

- There were no reported deaths of program participants.
- The program identified cases of hypertension through use of remote medical devices, resulting in prompt treatment.
- Participants maintained optimal blood sugar levels, effectively managed gestational diabetes, and improved overall maternal health.
- Continued support through the post-partum period ensured that the mental health needs of the mothers were met.
- Positive pilot program experiences resulted in greater trust with the medical system.

Florida HEALTH

Expansion

- Received \$12,663,856 in funding for program expansion during Fiscal Year 2023-2024.
- Currently expanding the program to 18 additional counties with the highest number of women experiencing severe maternal morbidity.
- Received proposals from hospitals and community organizations.



Florida HEALTH

Next Steps

- Expand data system.
- Promote consistent implementation while supporting the needs of each community.
- Continued evaluation of program clinical outcomes.

Questions?



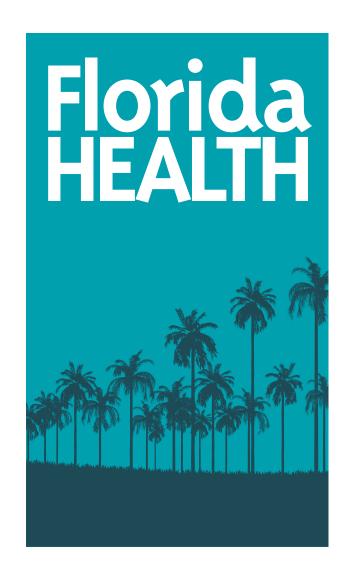
The Florida Senate

11/14/25	APPEARANCE R	ECORD	
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S-001 (08/10/2021)



LICENSURE BY ENDORSEMENT

Joe Baker, Jr., Board Executive Director
Division of Medical Quality Assurance
Florida Department of Health

HEALTH CARE LICENSURE BY ENDORSEMENT

Endorsement recognizes the due diligence of another jurisdiction and affords the applicant a streamlined licensure process without undergoing significant additional training, work experience, or examination and only requires completion of state-specific requirements.

Fiscal Year	Total Licenses Issued by Endorsement	Total Licenses Issued by Examination
2020-2021	29,251	91,745
2021-2022	36,073	98,424
2022-2023	27,869	100,298



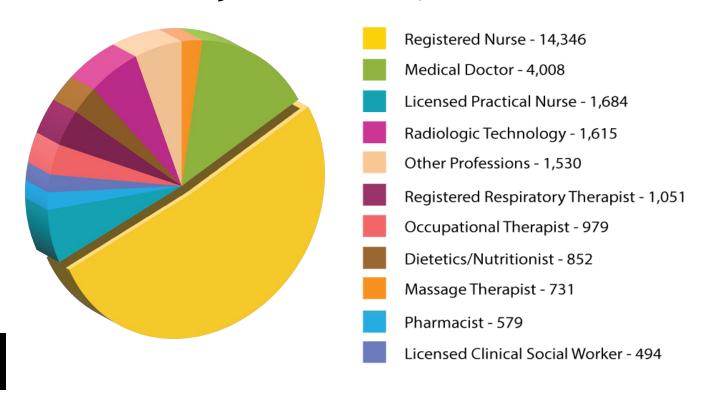
HEALTH CARE LICENSURE BY ENDORSEMENT

Profession	Endorsement Statute/Rule
Acupuncturist	Chapters 64B1-3.009 and 64B1-3.010, F.A.C.
Allopathic Physician	Section 458.313, Florida Statutes
Audiologist	Section 468.1185, Florida Statutes
Certified Nursing Assistant	Section 464.203, Florida Statutes
Mental Health Professions (Ch. 491)	Section 491.006, Florida Statutes
Dietitian	Section 468.513, Florida Statutes
Electrologists	Section 478.47, Florida Statutes
Licensed Practical Nurse	Section 464.009, Florida Statutes
Massage Therapist	Section 480.041, Florida Statutes
Midwifery	Section 467.0125, Florida Statutes
Nursing Home Administrator	Section 468.1705, Florida Statutes
Occupational Therapist	Section 468.213, Florida Statutes
Pharmacist	Section 465.0075, Florida Statutes
Physical Therapist	Section 486.081, Florida Statutes
Physical Therapist Assistant	Section 486.107, Florida Statutes
Psychologist/School Psychologist	Section 490.006, Florida Statutes
Rad-Tech	Section 468.3065, Florida Statutes
Registered Nurse	Section 464.009, Florida Statutes
Respiratory Therapist	Section 468.358, Florida Statutes
Speech-Language Pathologist	Section 468.1185, Florida Statutes



HEALTH CARE LICENSURE BY ENDORSEMENT

Total Number of Endorsement Applications Received by Profession, FY 2022-23





The average number of business days to issue an endorsement license to a qualified applicant.



QUESTIONS?

Joe Baker, Jr.

Division of Medical Quality Assurance Florida Department of Health (850) 245-4158

Joe.Baker@flhealth.gov



The Florida Senate

APPEARANCE RECORD

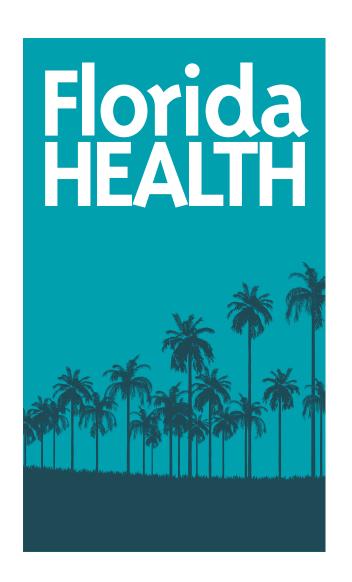
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S-001 (08/10/2021)



HEALTH SCREENINGS

Mark Lander

Deputy Secretary for County Health Systems Florida Department of Health

CHILDREN'S MEDICAL SERVICES NEWBORN SCREENINGS

- Screening Type: Screening for metabolic disorders, hereditary, congenital disorders, and hearing screening for newborns and infants
- Setting: Hospitals, birthing centers, at the home, or at the physician's office
- **Providers**: Hospital staff, physicians, midwives, hearing screeners, and audiologists

Screening Numbers

Screening Type	CY 2020	CY 2021	CY 2022
Newborn Screening	208,814	215,758	223,445
Hearing Screening	205,857	207,467	212,814

Sections 383.14, 383.145, 383.146, Florida Statutes (F.S.)



PRENATAL AND INFANT RISK SCREENS

- Screening Type: Risk assessment screenings to identify women and infants at risk for poor pregnancy or birth outcomes
- **Setting**: Health care provider offices and hospitals
- Providers: Clinical providers and hospital staff

Screening Numbers

Screening Type	FY 2020-2021	FY 2021-2022	FY 2022-2023
Prenatal	151,494	151,356	149,465
Infant	198,489	211,866	211,557

Sections 383.011 and 383.14, F.S.



SCHOOL HEALTH SERVICES

- Screening Type: Annual screenings for vision, hearing, scoliosis, growth and development
- **Setting**: Florida public schools
- Provider: School Health Services Program staff and school personnel

Screening Numbers

Screening Type	FY 2020-2021	FY 2021-2022	FY 2022-2023
Vision (K, 1 st , 3 rd , 6 th grade)	415,412	667,576	656,693
Hearing (K, 1st, 3rd, 6th grade)	319,635	498,436	479,126
Scoliosis (6th grade)	73,975	139,080	152,892
Growth and Development (1st, 3rd, 6th grade)	263,065	482,724	493,133

Section 381.0056, F.S.



BREAST AND CERVICAL CANCER SCREENINGS

- Screening Type: Mary Brogan Breast and Cervical Cancer Screening and Early Detection Program to provide breast and cervical cancer screening, diagnosis, evaluation, treatment, case management, and follow-up and referral
- Setting: Federally Qualified Health Centers, community-based health centers, private clinical providers, hospitals and imaging centers
- Provider: Clinical providers

Screening Numbers

Screening Type	FY 2020-2021	FY 2021-2022	FY 2022-2023
Cervical Cancer	1,760	1,513	1,275
Breast Cancer	12,090	10,537	10,789

Section 381.93, F.S.



BREAST AND CERVICAL CANCER SCREENINGS

- Screening Type: Provide breast and cervical cancer screening, diagnosis, evaluation, treatment, case management, and follow-up and referral
- **Setting**: County health departments
- **Provider**: Clinical providers

Screening Numbers

Screening Type	FY 2020-2021	FY 2021-2022	FY 2022-2023
Breast and Cervical Cancers	35,141	35,236	33,630

Section 381.93, F.S.



WELLNESS SCREENING FOR WOMEN

- Screening Type: Screenings provided through Pregnancy Care Network that include high blood pressure screening, anemia testing, thyroid screening, cholesterol screening and diabetes screening
- **Setting**: Subcontracted wellness service provider offices
- Provider: Clinical providers

Screening Numbers

Screening Type	FY 2020-2021	FY 2021-2022	FY 2022-2023
Wellness Screenings	5,257	5,175	4,398

Section 381.96, F.S.



CHRONIC DISEASE PREVENTION SCREENINGS

- **Screening Type**: Screenings for diabetes and hypertension
- **Setting**: Hospitals and community-based organizations
- **Provider**: Clinical and health education providers

Screening Numbers

Screening Type	CY 2020	CY 2021	CY 2022
Diabetes	28,126	33,897	Pending*
Hypertension	836	1,852	3,570

Section 385.103, F.S.



CHRONIC DISEASE PREVENTION SCREENINGS

Screening Type: Screenings for diabetes and hypertension

• **Setting**: County health departments

• **Provider**: Clinical providers

Screening Numbers

Screening Type	FY 2020	FY 2021	FY 2022
Diabetes	5,341	6,155	5,971
Hypertension	11,274	12,070	10,836

Section 381.93, F.S.



HIV SCREENING

- Screening Type: HIV testing provided through screening programs
- Setting: County health departments, community-based organizations, health centers, drug treatment centers, hospitals, universities, correctional facilities, and at outreach events
- Provider: Clinical providers

Screening Numbers

Screening Type	CY 2020	CY 2021	CY 2022
HIV	195,296	228,803	253,678

Section 381.004, F.S.



TUBERCULOSIS

- Screening Type: Tuberculosis community and individual screenings that are part of the Tuberculosis Control Programs operated through county health departments in all 67 counties
- Setting: County health departments, jails, prisons, private medical offices, work sites, hospitals, health centers, universities, and nursing homes
- **Provider**: Clinicians

Screening Numbers

Screening Type	CY 2020	CY 2021	CY 2022
Tuberculosis	5,216	8,537	14,181

Section 392.61, F.S.



NEXT STEPS

- Continue to evaluate the effectiveness of the screening programs.
- Evaluate the impact of screening programs on early detection of cancer.
- Evaluate the frequency of linkages to care based upon screenings.



CONTACT INFORMATION

Mark Lander

Deputy Secretary for County Health Systems
Interim Administrator Marion County Health
Department

352-644-2671

Mark.Lander@flhealth.gov



	The Florida Senate	
14 Nov	23 APPEARANCE RECORD	Bill Number of Topic
Meeting Date	Deliver both copies of this form to Senate professional staff conducting the meeting	Amendment Barcode (if applicable)
Committee	Baker, Jon Phone 8,	0 245 8158
Name	Ball Comman Was Email Julie	baker El health gov
Address Freet	Sall Cygross Was	
City	2C 32397 State Zip	
Speaking: For	Against Information OR Waive Speaking:	In Support Against
	PLEASE CHECK ONE OF THE FOLLOWING:	
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S-001 (08/10/2021)



Florida Medicaid: Graduate Medical Education Overview

Senate Health Policy Committee
November 14, 2024

What is Graduate Medical Education?

- The Graduate Medical Education (GME) program provides funding to qualified participating hospitals involved in providing resources for the education and training of physicians in specialties which are in a statewide supply-and-demand deficit.
- The second largest payer for GME is Medicaid.
- Florida Medicaid GME currently consists of eight programs.



History of GME

- Prior to July 1, 2013, Medicaid's inpatient per diem rate development methodology included costs associated with GME (although those costs were not specifically designated as such).
- There was no specific appropriation in the budget for GME, but as those costs were part of the inpatient per diem rate, the expenditures were included in the total Hospital Inpatient Services line item and were funded by a combination of General Revenue and Medical Care Trust Fund dollars.
- During the 2013 Legislative Session, the FY 2013-2014 General Appropriations Act (GAA) transferred funding from the Hospital Inpatient Services line item to a new line item specific to Graduate Medical Education.



GME: Statewide Medicaid Residency Program

 In 2013, Medicaid's Conforming bill (SB 1520), created the Statewide Medicaid Residency program to become effective July 1, 2013. The overall goal of the program is to:



- The bill established a formula to distribute the appropriated funds to participating hospitals. These costs were excluded from the baseline used to establish inpatient DRG payment rates, which became effective July 1, 2013.
- Funded by General Revenue and the Medical Care Trust Fund.



GME: Startup Bonus Program

The **Startup Bonus Program** began in FY 2014-15 and provides funding to hospitals with:

Newly accredited physician residency positions

or

Programs in the statewide supply/demand deficit specialties or subspecialties.

- Funding is first distributed to the two hospitals with the most GME residents in a statewide supply/demand deficit, the remaining funds are allocated to the remaining eligible GME providers.
- Funded by Grants and Donations Trust Fund (IGTs) and the Medical Care Trust Fund.



GME: Teaching Hospitals with Highly Specialized Tertiary Care

- Teaching Hospitals with Highly Specialized Tertiary Care aim to provide stroke and level 2 cardiovascular services; NICU II and III; and adult open heart; and have more than 30 full-time equivalent (FTE) residents over the Medicare cap.
- Funded by Grants and Donations Trust Fund (IGTs) and Medical Care Trust Fund.
- Began in FY 2018-19.



GME: Full Time Equivalents in Primary Care in Specific Medicaid Regions

- Full Time Equivalents in Primary Care in Specific Medicaid Regions provided by the Medical Care Trust Fund establishes FTE's in primary care and training in Medicaid regions with traditional primary care demand greater than supply of 85% or more.
- Funded by Grants and Donations Trust Fund (IGTs) and Medical Care Trust Fund.
- Began in FY 2020-21.



GME: Funding for Residency, Fellow or Intern Positions to Address the Deficit in Mental and Behavioral Health Facilities

- Funding for Residency, Fellow, or Intern Positions to
 Address the Deficit in Mental and Behavioral Health
 Facilities distributes funding for residents, fellows, or interns
 who rotate through mental health and behavioral health facilities
 to address the severe deficit of physicians trained in these areas.
- Funded by Grants and Donations Trust Fund (IGTs) and Medical Care Trust Fund.
- Began in FY 2020-21.



GME: Citrus Health Network for Psychiatry Residency Slots in Federally Qualified Health Centers

- The Citrus Health Network for Psychiatry Residency Slots in Federally Qualified Health Centers that hold continued institutional accreditation from the Accreditation Council for Graduate Medical Education in adult and child psychiatry.
- Funded by Grants and Donations Trust Fund (IGTs) and nonrecurring funds from the Medical Care Trust Fund.
- Began in FY 2020-21.



GME: Primary Care and Training in Medicaid Region 1 and/or 2

- The Primary Care and Training in Medicaid Region 1 and/or 2 was established to fund up to \$150,000 per full-time equivalent (FTE) in primary care and training in Medicaid Region 1 and/or Medicaid Region 2.
- Funded by Grants and Donations Trust Fund (IGTs) and Medical Care Trust Fund.
- Region 1 began in FY 2018-19; Region 2 came into the program in FY 2023-24.



GME: Slots for Doctors Program

- The Slots for Doctors Program is newly established to address the physician workforce shortage by increasing the supply of highly trained physicians through the creation of new resident positions, which will increase access to care and improve health outcomes for Medicaid recipients.
- Funded by General Revenue and Medical Care Trust Fund.
- Began in FY 2023-24.



GME Funding

Programs	Appropriation FY 2023-24
Statewide Medicaid Residency Program	\$ 191,080,850
Startup Bonus Program	\$ 100,000,000
High Tertiary	\$ 66,000,000
Full Time Equivalents in Primary Care in Specific	\$ 18,000,000
Medicaid Regions	
Mental and Behavior Health GME	\$ 4,400,000
Citrus Health Network	\$ 1,344,447
Primary Care in Regions 1 & 2	\$ 20,085,210
Slots for Doctors	\$ 30,000,000
Grand Total	\$ 430,910,507



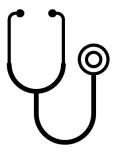
What is Indirect Medical Education?

ATE OF FLOR

- The Indirect Medical Education (IME) program was authorized in the FY 2021-22 General Appropriations Act.
- The IME program supports hospitals with residents in GME who are in training to become physicians. The intent of the IME program is to provide additional funding to hospitals to support these residents.
- IME covers costs associated with residency programs that may result in higher patient care costs in teaching hospitals relative to non-teaching hospitals.
 - For example, resident-provided care may be more expensive due to additional testing that residents may order as part of their training.
- Providers are reimbursed based on the hospital's IME costs for services provided and may be paid on a quarterly basis.
- Funded by Grants and Donations Trust Fund (IGTs) and Medical Care Trust

IME: Programs

- The Agency was authorized in FY 2023-24 to expend funds to manage an Indirect Medical Education (IME) Program and a Nursing Workforce Expansion and Education Program for institutions participating in a GME or nursing education program.
- The Agency is working toward implementation.





IME Funding

A budget amendment will be requested to provide an appropriation to implement the program.

Programs	lment Request FY 23-24
Statutory Teaching Hospitals	\$ 25,599,261
Public Teaching Hospitals	\$ 72,878,194
Children's & RPICC Teaching Hospitals	\$ 26,415,227
Academic Medical Centers Group 2 (AMC 2)	\$ 49,947,738
Academic Medical Centers Group 1 (AMC 1)	\$ 530,651,423
Grand Total	\$ 705,491,843

Appropriations to implement the new nursing workforce component will be requested following federal approval.



The Florida Senate APPEARANCE RECORD Bill Number or Topic Deliver both copies of this form to Senate professional staff conducting the meeting Amendment Barcode (if applicable) **Address** For Against OR Waive Speaking: In Support Information PLEASE CHECK ONE OF THE FOLLOWING: I am not a lobbyist, but received I am a registered lobbyist, I am appearing without

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representing:

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compensation or sponsorship.

S-001 (08/10/2021)

something of value for my appearance

(travel, meals, lodging, etc.),

sponsored by:



Steven A Godwin, MD, FACEP Emergency Medicine Physician

Dr. Godwin is Professor, Chair, and Chief of Service of the Department of Emergency Medicine at the University of Florida, College of Medicine-Jacksonville.

He has served as the Chair since March of 2012. He has also served as the Vice President for the University of Florida Jacksonville Physicians, Inc. since 2017. Dr. Godwin completed medical school in Charleston, South Carolina at the Medical



University of South Carolina in 1993. After a one year internship in internal medicine in Charleston, he completed Emergency Medicine at the University of Florida HSC in Jacksonville, Florida. Following graduation in 1997, he remained on staff as the Assistant Residency Director and Student Clerkship Director for the Department of Emergency Medicine. He then served in the role of Director of Medical Education and Residency Program Director, and Medical Director for Simulation Training at the Center for Simulation Education and Safety Research. In January 2008 he was named the Assistant Dean for Simulation Education at the University of Florida COM-Jacksonville. He has also served as the Program Director for the current Patient Safety Fellowship for 8 years.

Dr. Godwin has significant experience and expertise the area of Emergency Department operations and education. Prior to becoming Interim Chair in 2011, Dr. Godwin was named Chief of Service and Associate Chair for Academic Affairs for the Department of Emergency Medicine. Dr. Godwin is a member of the American College of Emergency Physicians' Clinical Policies Committee and has been actively involved in authoring and co-authoring multiple polices including questions related to Procedural Sedation, Hypertension and Headache. He previously has served as Co-Chair for the Society for Simulation in Healthcare (SSH) Emergency Medicine Simulation Interest Group and also as a panel member for the Society for Academic Emergency Medicine (SAEM) Simulation Academy Executive Committee. He is a co-founder of the "SimWars" simulation competition. In addition, he is a member of the Editorial Board for Emergency Medicine Practice and has authored and co-authored numerous chapters including resources on pediatric and adult procedural sedation and airway management. Dr. Godwin has received numerous local and national educational awards including being honored with the SAEM Simulation Academy's Distinguished Educator Award in 2017 and being named a Diplomat of SEMPA in 2019.

The Florida Senate

Luraent Care

Nov	vember 14, 2023	-	APPEAR	RANCE	RECOR	D	Emergency Ukgeni U
H	Meeting Date ealth Policy			ooth copies of tonal staff condu	his form to cting the meeting		Bill Number or Topic
	Committee						Amendment Barcode (if applicable)
Name	Steven A. Godwin,	MD			Phone	90424	46340
Addre	1000 Toro Court				Email 8	andy.	godwin@jax.ufl.edu
710/01/0	Street						
	Neptune Beach	FI		32266			
	City	State		Zip	- Control of the Cont		
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S-001 (08/10/2021)





Jennifer Lawrence
Chief Nursing Officer | Aston Health
jen.lawrence@astonhealth.com

Jennifer Lawrence is the Chief Nursing Officer for Aston Health, which operates over 30 skilled nursing facilities in the state of Florida.

Lawrence has devoted an almost 30-year career to serving our geriatric population from her beginnings as a high school volunteer, then as a Certified Nursing Assistant, then as a Licensed Practical Nurse, to a master's prepared Registered Nurse, and as a Licensed Nursing Home Administrator.

Lawrence holds a bachelor's degree in nursing as well as a dual master's degree in business administration and in nursing. Her experience spans all the geriatric continuums of care with positions including Risk Manager, Director of Nursing, Regional Nurse, Nursing Home Administrator, Assisted Living Administrator, Regional Director of Operations, VP of Clinical Services, and Chief Nursing Officer. She has extensive experience in Florida as well as multiple other states. She is focused on positive patient experiences and outcomes citing a strong compassionate team as the foundation for success.

Lawrence is an active member/presenter with the Florida Health Care Association, serving as the Vice-Chair for the Senior Clinician's Committee as well as an item writer for the National Association of Long-Term Care Administrator (NAB) exams. In 2023, Lawrence was awarded FHCA's Arthur H. Harris Government Services Award for her advocacy and support of the association's legislative initiatives to enhance the quality care and quality of life of Florida's long term care residents.

The Florida Senate

	The Florida Senate		
11/14/23	APPEARANCE RECORI	HC Workforce	
Meeting Date Health Policy	Deliver both copies of this form to Senate professional staff conducting the meeting	Bill Number or Topic	
Committee		Amendment Barcode (if applicable)	
Name <u>Jenniter La</u>	WYENCE Phone	813-558-6600	
Address 10150 Highland		jen.lawrence@AstenHal	
City State	te Zip		
Speaking: For Against	Information OR Waive Speaki	ing:	
PLEASE CHECK ONE OF THE FOLLOWING:			
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S-001 (08/10/2021)

sponsored by:



Peter Chang, M.D.

Vice President of Healthcare Design, Tampa General Hospital Board Member, MORE Health, Inc., and the Tampa General Medical Group

Dr. Peter Chang is the Vice President of Healthcare Design at Tampa General Hospital (TGH). He is responsible for designing forward-looking healthcare strategies to improve clinical quality, efficiency, and care coordination while decreasing the total cost of care.



As part of this mission, Dr. Chang led the design and implementation of TGH's "Hospital at Home" program. Prior to his role in design, he created and operated TGH's Clinical Command Center focused on system-wide efficiency and quality (CareComm) and served as an assistant professor of medicine in the Department of Hospital Medicine.

Dr. Chang earned his Doctor of Medicine at the University Of South Florida Morsani College of Medicine and completed his Bachelor of Science in biology at the University of South Florida. He is a board member of MORE Health Inc. and the Tampa General Medical Group. He has been honored with several industry awards and presents regularly on the topics of healthcare innovation and technology.



The Florida Senate

APPEARANCE RECORD

Bill Number or Topic

Deliver both copies of this form to Senate professional staff conducting the meeting Amendment Barcode (if applicable) Phone 813 - 389 - 9512 Email pchange tgh. org 2 Columbia Address 33606 OR Waive Speaking: In Support Against

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S-001 (08/10/2021)

Joel Herbst, Ed.D. Florida Atlantic University

Superintendent of Schools for the Florida Atlantic University School District:

In this role, Dr. Herbst oversees all aspects of the district's operational policies, research activities, objectives, initiatives as well as community outreach, partnership development, supervision, and management of off-site and special programs, assessment, and strategic planning.



Assistant Dean for the Office of PK-12 Schools and Educational Programs:

In this role, Dr. Herbst oversees all aspects of A.D. Henderson University School, FAU High School, Bezos Academy, Palm Pointe Educational Research Center for Child Development, Pine Jog Environmental Research Center and the Max Planck Academy High School.

Dr. Herbst began his career in education in 1990 as an Advanced Placement American Government and Macro Economics Teacher for Broward County Public Schools. Additionally, he served as an Assistant Principal, Principal, Director of School Improvement, and Regional Superintendent of Schools. In 2012, he became the Assistant Dean of the College of Education at Florida Atlantic University, where he serves in this role as well as the Superintendent of Schools.

As a school leader, Dr. Herbst served as the President of the Florida Association of School Administrators, Board of Governor of the American Association of School Administrators, Member, The Council for Corporate and School Partnerships, and Member of AASA, NASSP, NAESP and FASA.



The Florida Senate

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11/14/23	APPEARANCI	E RECORD	
Meeting Date Health Policy	— Deliver both copies o Senate professional staff cond		Bill Number or Topic
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Name Joel Herhst	•	Phone 954	292 2716
Address 177 Glades Roa	d	Email	bst 10 fay.edu
Street		J	
Bocu Ruter	FL 33431		
City	State Zip		
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S-001 (08/10/2021)

sponsored by:



Community Health of South Florida, Inc.

Peter N. Wood
Coral Gables, Florida

Mr. Peter Wood serves as Vice President for Planning and Government Affairs at Community Health of South Florida (CHI), a large, non-profit, health care provider in Miami-Dade and Monroe Counties.



Within this role he oversees organizational and project planning, partnerships, grant acquisition, government affairs, farmworker health, outreach and mobile medical van services. Mr. Wood has worked at CHI since August 2018. From 2001 to 2018, he served as the Vice President of Programs and Community Investments at Health Foundation of South Florida, a philanthropic, grantmaking organization serving Broward, Miami-Dade and Monroe Counties. From 1993 to 2000, Wood served as Research Associate at The Institute for Public Policy and Management, University of Washington in Seattle where he conducted research and provided consultation to state and local governments in the area of health care and inter-system coordination.

Mr. Wood earned a Master's in Public Policy and Administration from the Daniel J. Evans School of Public Affairs, University of Washington in Seattle.



The Florida Senate

11/14/2022 ADDEADANCE DECORD

Panel Discussion

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Name	Peter W	ood	Phone <u>30</u>	5-278-6426
Address	s 10300 Su Street	216th Street	Email Pr	woode chi southfr. c
	<u>Miami</u>	FL 33190 State Zip		
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S-001 (08/10/2021)



VICE PRESIDENT OF CLINICAL SERVICES

April Novotny, RN, MSN, CEN, CENP, has been a part of Lakeland Regional Health since 2001, and her penchant for leadership has been evident from the beginning.

From various managerial roles in the Emergency
Department to her current role as Vice President of
Clinical Services, Ms. Novotny is a respected
decisionmaker and leader. She is a champion of standard
work to deliver the best outcomes and safest care to
patients and their families.

As Chief Nurse Executive, Ms. Novotny serves as an advocate for clinical excellence in nursing and works to empower nurses to be effective thought leaders in the advancement of nursing professionalism.

Her compassion and leadership shined bright as she role modeled resilience during the COVID-19 pandemic, comforting and reassuring nurses on the frontline.

One of Ms. Novotny's proudest achievements is her work with the optimization and redesign of emergency department flow at Lakeland Regional Health. These efforts resulted in the 2014 Innovation of the Year in Patient Care award from the Florida Hospital Association and the 2014 EmCare Genesis Cup Award for healthcare innovation for the groundbreaking changes made to reduce wait times in the emergency department that resulted in enhanced patient safety and better patient experiences. Ms. Novotny has also been at the forefront of numerous other improvement initiatives at Lakeland Regional Health that have brought positive changes in safety and quality on an organizational level.

She has authored or co-authored numerous articles for such publications as The Joint Commission Journal on Quality and Patient Safety, Nurse Leader and the Journal of Emergency Nursing. In addition, Ms. Novotny has presented on a wide range of topics at various conferences across the nation.

Education

- + Bachelor's degree in Nursing Florida State University
- + Master of Science degree in Nursing University of South Florida
- + Studying for her PhD in Organizational Leadership Southeastern University

Your Health, Our Promise,

The Florida Senate

APPEARANCE RECORD

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Bill	Number o	r Topic	

Amendment Barcode (if applicable)

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Against

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In Support

Against

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S-001 (08/10/2021)



FLORIDA SENATE HEALTH POLICY COMMITTEE

November 14, 2023

DELIVERING

Nationally Recognized Healthcare

STRENGTHENING

The Healthiest Community in Florida

ADVANCING

Building the Future of Healthcare

Investments to Meet the Current and Future Health and Medical Needs of Our Community

Executive Summary

Background

- Today, Lakeland Regional Health Medical Center is the second busiest Emergency Department (ED) in the U.S. with nearly 200,000 annual visits including over 5,000 Baker Acts each year.
- Lakeland's status as the busiest second busiest ED is directly correlated to current physician shortages in Polk County. Currently, Polk County has one-third fewer Primary Care providers per resident compared to the state of Florida and one-half the number of Behavioral Health providers per resident compared to the state of Florida.

Lakeland Regional Health (LRH) is actively reducing the number of ED visits for nonemergent care by the following means:

- LRH has significantly increased the number of Physicians and Advanced Practice Practitioners (APPs) throughout the community. Since 2014, LRH has grown its employed provider group from 76 providers to over 320 providers. Today, the LRH Physician Group includes 33 primary care physician (PCPs) and 25 APPs supporting primary care in 11 geographic locations. LRH primary care practices have experienced 5% year-after-year growth with 150,000 patient visits in FY23. In addition, LRH has physician specialist in over 45 different specialties across 13 geographic locations. (See pages 8-10)
- LRH has also established two local urgent care centers with plans to open more in identified areas of need. LRH Urgent Care is open to all community members, does not require an appointment, offers extended hours, and is open Saturday and Sunday. (See page 11)
- Over the next five years, LRH plans to add up to 200 GME residents dispersed in the areas of: Family Medicine, Internal Medicine, Behavioral Health,
 Ob/Gyn, Emergency Medicine, General Surgery, Surgical Critical Care, Behavioral Health, and Transitional Year. GME will further improve quality of
 care and patient outcomes, increase access for the underserved residents in our community, and create a physician pipeline to help address the
 physician shortage in Polk County. (See pages 12-15)

Investments to Meet the Current and Future Health and Medical Needs of Our Community

Executive Summary, continued

Lakeland Regional Health (LRH) is actively reducing the number of ED visits for nonemergent care by the following means:

- LRH continues to operate its Family Health Center. Now rebranded as the Morrell Clinic, this physician practice, which sits across the street from the LRHMC ED serves as the LRH Internal Medicine site for GME. It will include 12 board certified internal medicine physicians and supported by up to 60 internal medicine residents. It will be open to all patients and will continue to serve as a mechanism to divert non-emergent ED patients and assign them to a LRH medical home for primary care needs. (See page 18)
- LRH continually identifies community members in its inpatient, outpatient, and Urgent Care settings, who do not have a primary care physicians and attempts to introduce them into a medical home. (See pages 17-18)
- LRH's "Shop Talk" program focuses on health outreach efforts in places outside the traditional clinic setting, such as barbershops and hair salons, in an effort to support the decrease of health disparities among people of color and provide screenings and primary care, especially in the areas of heart disease, cancer, stroke, and diabetes. (See page 19)
- LRH opened its new 96-Bed Harrell Family Center for Behavioral Wellness, October 2022 with 34 providers psychiatrists, psychologists, advanced practitioners, therapists. This facility is the only Electroconvulsive therapy (ECT) provider in Polk (1,142 ECT procedures, 67% Growth in 12 months). This facility will also offer Intensive Outpatient and Partial Hospitalization Programs with the goal of lowering the number of Baker Acts and patients in crisis. Finally, LRH will integrate its Behavioral Health providers into LRH physician locations, especially locations providing primacy care. (See page 7)



INVESTMENTS TO MEET THE CURRENT AND FUTURE HEALTH AND MEDICAL NEEDS OF OUR COMMUNITY



Lakeland Regional Health System Facts



LRH Harrell Family Center for Behavioral Wellness



Lakeland Regional Health Physician Group



Graduate Medical Education



Connecting Primary Care to All Community Members



Growing Services in Polk County

HEALTH SYSTEM FACTS



HEALTH SYSTEM FACTS



2nd Largest Private Employer in Polk County

7,300+ Team Members



1160+ Medical Staff Team Members Consisting of

800+ Physicians and

360+ Advanced Practice Provider & Dependent Practitioners



320+ Employed Physicians and Advanced Practitioners in the LRH Physician Group



HEALTH SYSTEM FACTS

One of Florida's Largest Acute Care Hospitals (892-beds)



90% of LRHMC patients come from Polk County



Second Busiest Emergency Department in the US (Nearly 200,000 annual visits including over 5,000 Backer Acts each year)



Polk County's only Level II Trauma Center & only trauma center in the tri-county region



Over the last three years the LRHMC daily census has maintained around 800 to 850 inpatients





HARRELL FAMILY CENTER FOR BEHAVIORAL WELLNESS

- Located on the main LRHMC Campus
- Moved in Oct 2022 (96 acute care behavioral health beds)
- Over 35% year to year growth in inpatient admissions from FY22
- Over 30% increase in outpatient visits from FY22
- 34 providers psychiatrists, psychologists, advanced practitioners, therapists
- The only Electroconvulsive therapy (ECT) provider in Polk (1,142 ECT procedures, 67% Growth in 12 months)
- Intensive Outpatient and Partial Hospitalization Programs with the goal of lowering the number of Baker Acts and patients in crisis
- Integrating Behavioral Health care at other LRH outpatient locations





LAKELAND REGIONAL HEALTH PHYSICIAN GROUP



LAKELAND REGIONAL HEALTH PHYSICIAN GROUP

The LRH Physician Group Includes:

- 320+ Providers
- 20+ Locations
- 40+ Specialties



Since 2014, the Lakeland Regional Health Physician Group has grown over 4 times in size.



LAKELAND REGIONAL HEALTH PHYSICIAN GROUP

PRIMARY CARE

- 48 Providers across 11 different geographic locations
 - 33 Physicians
 - 15 Advanced Practitioners
- ~ 100,000+ Annual Visits
- ~5% YOY Growth



In addition, LRH has physician specialists in over 45 different specialties across 13 geographic locations.



LAKELAND REGIONAL HEALTH PHYSICIAN GROUP

URGENT CARE

- Open to All Community Members
- No appointment needed/Walk-In
- Open 8 a.m. 8 p.m. M-F
 8 a.m. 5 p.m. Sat Sun
- Two locations in South Lakeland, with a new North Lakeland location opening in 2024.





GRADUATE MEDICAL EDUCATION

WHY GME?

LRH has been pursuing Graduate Medical Education for well over a decade

- LRH was one of the largest hospitals in the nation that had no material involvement in training residents
- GME will further improve quality of care and patient outcomes
- Residency practices will increase access for the underserved residents in our community
- Create a physician pipeline to help address the physician shortage in Polk County
 - Polk County has 1/3 fewer Primary Care providers per resident compared to the state of Florida
 - Polk County has 1/2 the number of Behavioral Health providers per resident compared to the state of Florida



GRADUATE MEDICAL EDUCATION

ACCREDITED PROGRAMS

- Internal Medicine
- General Surgery
- Surgical Critical Care
- Psychiatry
- Family Medicine
- Transitional Year
- Emergency Medicine

UNDER DEVELOPMENT

Obstetrics/Gynecology

Future Potential Fellowships:

- Pulmonary/Critical Care
- Cardiology
- Hematology/Oncology



RESIDENTS AT LRH

	AY 2024	AY 2025	AY 2026	AY 2027	AY 2028
Emerg Med	15	30	45	45	45
Gen Surg	4	8	12	16	20
Int Med	20	40	60	60	60
Psych	4	8	12	16	16
Trans Yr	18	18	18	18	18
Fam Med	8	16	24	24	24
Surg Crit Care	1	4	4	4	4
ОВ		3	6	9	12
TOTAL	70	127	181	192	199



CONNECTING PRIMARY CARE TO ALL COMMUNITY MEMBERS

WAYS LRH CONNECTS PRIMARY CARE?

LRH has many programs to identify community members who do not have a primary care physician and introduce them to a medical home.



Each community member arriving at the Lakeland Regional Health Medical Center ED is provided an appropriate EMTALA medical screening. If there is an emergent medical need, the patient is treated and then either discharged or admitted if additional hospital care is needed.



When a community member is a patient at the Lakeland Regional Health Medical Center ED, he or she is asked for the name of their primary care physician. If the patient does not have a primary care physician, a LRH scheduler/coordinator contacts the patient and discusses the importance of having a primary care physician with the goal of the patient selecting a primary care physician for follow-up care and future primary care medical needs.



Each community member admitted to Lakeland Regional Health Medical Center is asked for the name of their primary care provider. If he or she does not have a primary care physician an alert is sent to a LRH scheduler/coordinator, who contacts the patient and discusses the importance of having a primary care physician with the goal of the patient selecting a primary care physician for follow-up care and future primary care medical needs.

WAYS LRH CONNECTS PRIMARY CARE?

LRH has many programs to identify community members who do not have a primary care physician and introduce them to a medical home.



Each community member arriving at the Lakeland Regional Health Medical Center Department is provided an appropriate EMTALA medical screening. If there is no emergent medical need, the patient is introduced to the LRH Morrell Clinic.

 The LRH Morrell Clinic (formerly known as the Family Health Center) will be the site for the LRH Internal Medicine GME program. It will include 12 board certified internal medicine physicians and supported by up to 60 internal medicine residents. The Morrell Clinic is open to all community members for their primary care needs



When a community member is treated in a LRH Urgent Care practice, he or she is asked for the name of their primary care physician. If the patient does not have a primary care physician a LRH scheduler/coordinator contacts the patient and discusses the importance of having a primary care physician with the goal of the patient selecting a primary care physician for follow-up care and future primary care needs.

WAYS LRH CONNECTS PRIMARY CARE?

LRH Shop Talk: Empowering Communities through health education and screenings

- LRH's "Shop Talk" program focuses on health outreach efforts in places outside the traditional clinic setting, such as barbershops and hair salons, in an effort to support the decrease of health disparities among people of color and provide screenings and primary care, especially in the areas of heart disease, cancer, stroke, and diabetes.
- By empowering community members through education, LRH encourages community members to take control over their health, make healthy lifestyle choices, and seek preventative care.

"It all can start here at the barbershop."

Daniel Haight, MD LRH VP of Community Health



GROWING SERVICES IN POLK COUNTY



LRH'S NEWEST LOCATION

Opened Nov 7, 2023

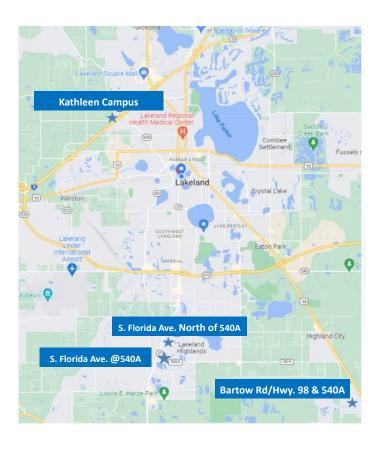
- Family Medicine (GME)/Primary Care
- Urgent Care Coming in 2024!
- Specialty Services:
 - Urology
 - Endocrinology
 - Neurology
 - General Surgery & Trauma
 - Infectious Disease
 - Pulmonology

KATHLEEN CAMPUS (20.6 ACRES)





FUTURE LOCATIONS IN POLK COUNTY



- S. Florida Avenue @ 540A (2.2 Acres)
 - Freestanding Emergency Dept. (early 2025)
- S. Florida Avenue North of 540A (5.6 Acres)
 - 55,000 SF Outpatient Services
- Bartow Rd/Hwy. 98 & 540A (100 Acres)
 - · Freestanding Emergency Dept.
 - Medical Office Buildings
 - Ambulatory Care Centers
 - Acute Care Hospital

QUESTIONS

	The Florida Senate	
11114	APPEARANCE REC	ORD
Heeting Date	Deliver both copies of this form to Senate professional staff conducting the r	Bill Number or Topic
Committee		Amendment Barcode (if applicable)
Name JACK	CORY PH	none <u>850 ~566~9175</u>
Address 730 Fo	ast part Al Er	mail Sych (COR) OF ACONSULTA
Street	State Zip	
Speaking: For	Against Information OR Waive	Speaking:
	PLEASE CHECK ONE OF THE FOLI	LOWING:
I am appearing without compensation or sponsorship.	I am a registered lobbyist, representing:	I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.),
	Florida Nirses	sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022 Joint Rules. pdf (flsenate.gov)

This form is part of the public record for this meeting.

The Florida Senate APPEARANCE RECORD Meeting Date Heath Case Policy Committee Name Amendment Barcode (if applicable) Amendment Barcode (if applicable) Phone Address Address Address Address Amendment Barcode (if applicable) Email Stephanie Ormono Family MEDICAL CENTER, COR APPEARANCE RECORD Access to Legathor Bill Number or Topic Amendment Barcode (if applicable) Email Stephanie Ormono Family MEDICAL CENTER, COR APPEARANCE RECORD Bill Number or Topic Amendment Barcode (if applicable) Email Stephanie Ormono Family MEDICAL CENTER, COR ACCESS to Legathor Bill Number or Topic

Speakin	g: Fo	r Against	Information	OK	Waive Speaking:	In Support	Against

PLEASE CHECK ONE OF THE FOLLOWING:

I am appearing without compensation or sponsorship.

I am a registered lobbyist, representing:

I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022 Joint Rules.pdf (flsenate.gov)

This form is part of the public record for this meeting.

Meeting Date Leath Police	The Florida Senate APPEARANCE RECORD Deliver both copies of this form to Senate professional staff conducting the meeting	at the end Bill Number or Topic
Name A Cerdice Sec	Ob Phone	Amendment Barcode (if applicable) 754-999-0867
Address Po Box 33	58 946 Email C	ecadia @heathy Ma.a
Speaking: For Agai		ng:
I am appearing without compensation or sponsorship.	PLEASE CHECK ONE OF THE FOLLOWING I am a registered lobbyist, representing:	I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

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This form is part of the public record for this meeting.

The Florida Senate

APPEARANCE RECORD

Heal	th care
	Manager at the same of the sam

/ Meeting Date	Deliver both copies of this form to	Bill Number or Topic
Health Polices	Senate professional staff conducting the meeting	at the end please
Committee		Amendment Barcode (if applicable)
Name Karen Wood	dall Phone 850	-321-9386
Address 579 E. Call	St. Email Fcf	ep) yaloo con
Street		
Tællahiner,	A 32301	•
City St <i>d</i> te	Zip	
Speaking: For Against	Information OR Waive Speaking:	In Support Against
	PLEASE CHECK ONE OF THE FOLLOWING:	
I am appearing without compensation or sponsorship.	I am a registered lobbyist, representing: FI Center for FISCAL + FLOROMIC POLICY and Southern Powerty haw	I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

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This form is part of the public record for this meeting.

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Sua formittee (Audi	4 DAVANT		Amendment Barcode (if applicable) 3 - 569-0999
Address 3759 Los Street Tollah ASSO City	hehall Rel 2 32309 State Zip	Email <u>Va</u>	udia@adamsstAdvous
Speaking: For	Against Information OR	Waive Speaking:	☐ In Support ☐ Against
I am appearing without compensation or sponsorship.	PLEASE CHECK ONE OF I am a registered lobby representing: FOR ACA SCOL		I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

While it is a tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this hearing. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard. If you have questions about registering to lobby please see Fla. Stat. §11.045 and Joint Rule 1. 2020-2022 Joint Rules.pdf (flsenate.gov)

This form is part of the public record for this meeting.

	The Florida Senate	Access to fact a
10/14/2023	APPEARANCE RECOR	D
Meeting Date A Carca Police	Deliver both copies of this form to Senate professional staff conducting the meeting	Bill Number or Topic
Committee		Amendment Barcode (if applicable)
Name Mai Kung	Phone _	850-510-7500
Address 37/2 Long Tha	mp Cic Email _	mkurg DNP (a Gmail, a
Tollshossee T	Zip 3230 9	
Speaking: For Against	Information OR Waive Speak	ing:
	PLEASE CHECK ONE OF THE FOLLOWIN	IG:
I am appearing without compensation or sponsorship.	I am a registered lobbyist, representing:	I am not a lobbyist, but received something of value for my appearance (travel, meals, lodging, etc.), sponsored by:

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This form is part of the public record for this meeting.

The Florida Senate

APPEARANCE RECORD

Health care professional

Shortage

III Number or Topic

Health Policy
Committee

Deliver both copies of this form to Senate professional staff conducting the meeting

Amendment Barcode (if applicable)

	Committee							
Name	Geoffrey Helm	5			Phone <u>8</u>	350-481-3	609	
	/							
Address	Street E. Creeh D	ven Dr.			Email 💆	ghelms. eco	Sagmail. Com	
	wewqhitchha City	FL State	•	32465 Zip				
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THE FLORIDA SENATE

Tallahassee, Florida 32399-1100

COMMITTEES:

Governmental Oversight and Accountability Health Policy Judiciary

SELECT COMMITTEE:

Select Committee on Resiliency, Chair

JOINT COMMITTEE:

Joint Legislative Budget Commission

SENATOR BEN ALBRITTON

Majority Leader 27th District

November 14, 2023

Chair Burton,

I humbly request to be excused from the November 14th Health Policy committee. Your consideration is greatly appreciated.

Sincerely,

REPLY TO:

☐ 150 North Central Avenue, Bartow, Florida 33830 (863) 534-0073 ☐ 410 Taylor Street, Suite 106, Punta Gorda, Florida 33950 (941) 575-5717

□ 318 Senate Building, 404 South Monroe Street, Tallahassee, Florida 32399-1100 (850) 487-5027

Senate's Website: www.flsenate.gov

CourtSmart Tag Report

Room: KB 412 Case No.: - Type: Caption: Senate Committee on Health Policy Judge:

Started: 11/14/2023 4:02:02 PM

Ends: 11/14/2023 6:36:05 PM Length: 02:34:04

4:02:02 PM Chair Burton calls meeting to order

4:02:04 PM Sen. Albritton is excused 4:02:06 PM Roll call & guorum verification

4:03:15 PM Sen. Grall is sitting in on today's committee meeting

4:05:22 PM Sen. Book is recognized for a question

4:05:46 PM 4:06:38 PMDr. Emma Spencer, Div. Dir for Public Health Statistics & Performance Mgmt.
with Dept. of Health, is doing a presentation on health care workforce shortages

4:18:29 PM Sen. Book recognized for a question

4:19:09 PM Dr. Spencer responds

4:19:30 PM back & forth

4:20:37 PM Dr. Spencer to do second presentation on loan reimbursement

4:28:31 PM Sen. Davis recognized for questioning

4:28:53 PM Dr. Spencer verifies

4:29:17 PM Chair requests Dr. Spencer clarify how HPSA is determined

4:30:02 PM Dr. Spencer concludes her presentation

4:30:12 PM Next is Dr. Kenneth Scheppke, Deputy Secretary for the Dept. of Health, for a presentation

4:41:39 PM Sen. Book recognized
4:42:38 PM Dr. Scheppke responds
4:43:06 PM follow up by Sen. Book

4:43:46 PM additional question asked by Sen. Book

4:44:11 PM Dr. Scheppke responds

4:44:19 PM Sen. Brodeur recognized for a question

4:45:13 PM Dr. Scheppke responds

4:45:49 PM back & forth

4:46:13 PM Sen. Harrell recognized for a question

4:46:47 PM Dr. Scheppke answers

4:47:07 PM back & forth between Sen. Harrell & Dr. Scheppke

4:48:59 PM Next is Mr. Joe Baker, DOH Executive Director of Medical Quality Assurance, for a presentation

4:52:05 PM Chair Burton asks for clarification on an item

4:52:34 PM Sen. Harrel recognized

4:52:56 PM back & forth

4:53:46 PM Lastly from DOH is Mark Lander, Deputy Secretary for County Health Systems, for a presentation

5:03:38 PM Sen. Davis recognized for questions

5:04:03 PM Mr. Lander responds

5:05:12 PM back & forth

5:06:44 PM Sen. Osgood recognized **5:07:09 PM** Mr. Lander responds

5:07:32 PM Sen. Calatayud recognized for a question

5:08:06 PM Mr. Lander recognized to respond

5:08:59 PM follow-up question

5:09:06 PM Mr. Lander answers 5:10:02 PM Chair Burton has a question

5:10:22 PM Mr. Lander answers

5:11:19 PM Shift to AHCA

5:11:21 PM Mr. Tom Wallace, Deputy Secretary for Health Care Finance & Data, for a presentation

5:28:40 PM Sen. Harrell recognized for questioning

5:29:21 PM Mr. Wallace recognized to answer

5:30:31 PM back & forth

5:31:42 PM Sen. Davis recognized for question

5:32:00 PM Mr. Wallace responds **5:33:25 PM** Panel discussion starts

5:34:20 PM President's Office has authorized continuation of meeting until agenda's finished per Rule 2.10 (2)

5:34:40 PM	Introduction of panel
5:34:51 PM	April Novotny, Chief Nurse Exec., Lakeland Reg'l Health
5:42:40 PM	Mr. Peter Wood
5:42:49 PM	VP of Planning & Gov't Affairs, Community Health of S. Fla.
5:49:04 PM	Dr. Joel Herbst
5:49:11 PM	Superintendent, Fla. Atlantic Univ. PK-12 Schools
5:56:17 PM	Dr. Peter Chang, VP of Health Care Design, Tampa General
6:05:07 PM	Ms. Jennifer Lawrence, RN
6:05:22 PM	Chief Nursing Officer, Aston Health
6:11:26 PM	Steven A. Godwin, M.D.
6:11:51 PM	Prof. & Chair, Dept. of Emergency Medicine, UF/College of Medicine - Jax
6:19:57 PM	Sen. Harrell recognized for questions
6:21:31 PM	Dr. Godwin recognized to answer
6:22:40 PM	Dr. Chang responds
6:23:07 PM	April Novotny responds
6:23:16 PM	Sen. Brodeur recognized for a question
6:24:35 PM	Dr. Chang answers
6:26:00 PM	follow-up from Sen. Brodeur
6:26:31 PM	Sen. Book recognized
6:28:16 PM	Chair Burton has questions
6:29:01 PM	Joel Herbst answers
6:30:35 PM 6:31:17 PM	Chair Burton speaks
6:31:50 PM	Mr. Wood responds back & forth
6:32:25 PM	Sen. Brodeur recognized
6:32:57 PM	Ms. Lawrence recognized for comment
6:34:41 PM	Chair Burton thanks panel for their appearance
6:35:26 PM	those who filled out appearance cards - mostly for info purposes -
6:35:45 PM	Sen. Brodeur moves we adjourn
0.0001	Com Diodean moved no dejourn